



## UNITED STATES PATENT AND TRADEMARK OFFICE

UNITED STATES DEPARTMENT OF COMMERCE  
 United States Patent and Trademark Office  
 Address: COMMISSIONER FOR PATENTS  
 P.O. Box 1450  
 Alexandria, Virginia 22313-1450  
[www.uspto.gov](http://www.uspto.gov)



Bib Data Sheet

CONFIRMATION NO. 1835

|                             |                                       |              |                        |                                      |
|-----------------------------|---------------------------------------|--------------|------------------------|--------------------------------------|
| SERIAL NUMBER<br>09/759,107 | FILING DATE<br>01/12/2001<br><br>RULE | CLASS<br>379 | GROUP ART UNIT<br>2614 | ATTORNEY DOCKET NO.<br>2344-001-CIP2 |
|-----------------------------|---------------------------------------|--------------|------------------------|--------------------------------------|

## APPLICANTS

Elliott D. Light, Rockville, MD;

Jon L. Roberts, Great Falls, VA;

OA

## \*\* CONTINUING DATA .....

11/03/1997

This application is a CIP of 08/963,373 10/20/1997 PAT 6,175,616  
and is a CIP of 09/265,656 03/02/1999 PAT 6,483,900

OA

cwc  
6.02.06

## \*\* FOREIGN APPLICATIONS .....

OA

## IF REQUIRED, FOREIGN FILING LICENSE GRANTED

\*\* SMALL ENTITY \*\*

\*\* 03/08/2001

|                                 |  |                     |           |           |             |
|---------------------------------|--|---------------------|-----------|-----------|-------------|
| Foreign Priority claimed        | <input type="checkbox"/> yes <input checked="" type="checkbox"/> no  | STATE OR<br>COUNTRY | SHEETS    | TOTAL     | INDEPENDENT |
| 35 USC 119 (e-d) conditions met | <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/>   | MD                  | DRAWING 5 | CLAIMS 51 | CLAIMS 17   |
| Verifier and Acknowledged       | Examiner's Signature <br>Initials  |                     |           |           |             |

## ADDRESS

Roberts Abokhair & Mardula, L.L.C.  
 11800 Sunrise Valley Drive, Suite 1000  
 Reston, VA  
 20191

## TITLE

Method and apparatus for obtaining telephone status over a network

|                                |   |   |
|--------------------------------|---|---|
| FILING FEE<br>RECEIVED<br>1750 | FEES: Authority has been given in Paper<br>No. _____ to charge/credit DEPOSIT ACCOUNT<br>No. _____ for following: | <input type="checkbox"/> All Fees<br><input type="checkbox"/> 1.16 Fees ( Filing )<br><input type="checkbox"/> 1.17 Fees ( Processing Ext. of time )<br><input type="checkbox"/> 1.18 Fees ( Issue )<br><input type="checkbox"/> Other _____<br><input type="checkbox"/> Credit |
|--------------------------------|---|---|